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Robert W. Connors, Esq. Bell, Boyd & Lloyd LLC P.O. Box 1135					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop 1SSUE FEE address above, or being lacismile transmitted to the USFTO (571) 273-285s, on the date indicated below.				
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APPLICATION NO. FILING DATE		1		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/623,410 07/18/2003		Patrick J. Car		Patrick J. Carr	112905-023			4999	_
TITLE OF INVENTION:	METHOD OF OPERA								
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional YES		\$700		\$300	\$0		\$1000	12/26/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS					
ADDIE, RAYMOND W			3671 404-075000						
1. Change of correspondence address or indication of "Fee Addrec CFR 1.363).  Change of correspondence address (or Change of Correspondence address form FTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" indication form FTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cu Number is required.			Correspondence	2. For printing on the patent floot page, list [1] the names of up to 3 registered patent attorneys or agents OR, alternatively, [2] the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLIASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  AVTUTE L.L.C. Chicago, Illinois									
Please check the appropria	ite assignee category or	catego	ries (will not be pr	inted on the patent):	Individual 🖾 C	orporati	on or other private gro	up entity 🔲 Governn	nen
4a. The following fee(s) as    Solution   Solution	small entity discount p		Description: Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by redict card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required, fig(s), any deficiency, or credit any overpayment, to Deposit Account Number 102−18.18 (enclose an extra copy of this form).						
5. Change in Entity State				-					
a. Applicant claims				b. Applicant is no los	nger claiming SMA	LLEN	ITTY status. See 37 CI	R 1,27(g)(2).	
NOTE: The Issue Fee and interest as shown by the re	cords of the United Sta	tes Pat	ent and Trademark	Office.	tne applicant, a reg	stereu	attorney or agent, or in	e assignee or other par	.y n
Authorized Signature _	Tobal	L.	Corner		Date De	cemb	er 21, 2006	<del></del>	
Typed or printed name Robert W. Connors					Registration N		46,639		
This collection of informa an application. Confidenti submitting the completed this form and/or suggestio Box 1450, Alexandria, Vi Alexandria, Virginia 2231	tion is required by 37 C ality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC 3-1450.	FR 1.3 U.S.C USPT rden, sl NOT	11. The informatic , 122 and 37 CFR O. Time will vary hould be sent to the SEND FEES OR (	on is required to obtain or 1.14. This collection is ed depending upon the indi e Chief Information Offic COMPLETED FORMS T	retain a benefit by t timated to take 12 vidual case. Any co er, U.S. Patent and O THIS ADDRES:	he pub minutes ommen Traden S. SEN	lic which is to file (and to complete, includin to on the amount of tin nark Office, U.S. Depa D TO: Commissioner	by the USPTO to proof g gathering, preparing, ne you require to com- urtment of Commerce, for Patents, P.O. Box 1	and olete P.O 450

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